

The Ritalin wars continue

The pharmaceutical industry's effect on prescribing of methylphenidate has been profound

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Ritalin (methylphenidate), the drug used to treat attention-deficit hyperactivity disorder (ADHD), cannot stay out of the news. Class-action suits filed recently in New Jersey and California allege a conspiracy between the pharmaceutical industry, physicians, and the leading ADHD self-help group to unnecessarily medicate American children with a dangerous drug. This news came at the same time that 200 child mental health experts met in Washington, DC, for a 2-day conference sponsored by the Surgeon General on children's mental health. This conference, and another at the National Institute of Mental Health (NIMH), was a direct response to national concerns raised by a report last spring of an alarming increase in the use of Ritalin in toddlers. First Lady Hillary Rodham Clinton was the most conspicuous voice asking questions. But what is the parent of a child who is struggling in school to think about Ritalin?

Ritalin is the best known of the stimulant class of drugs that have been used for more than 60 years to treat childhood hyperactivity, now called ADHD. Myths abound about Ritalin, and the debate over the drug quickly verges on hyperbole. For example, few know that Adderall, a purportedly "new" concoction of amphetamine, has surpassed Ritalin as the most widely prescribed medication for ADHD in annual prescriptions in America.¹ All the stimulants used for ADHD, including methamphetamine, have essentially the same effects and side effects, differing mainly in their duration of action.²

Most people continue to think that stimulants, like Ritalin, work paradoxically on hyperactive kids to calm

them down. Many studies have proved otherwise: stimulants like Ritalin work the same in children and adults—whether or not they have ADHD—to improve their ability to focus on tasks that are difficult or boring.³ Therefore, prescribing Ritalin as a way to diagnose ADHD is absurd because everyone's performance improves with its use.

Higher doses of Ritalin speed up children as well as adults. Children, however, do not tolerate these higher doses, nor do they self-medicate. Adults do, and therefore, they are at risk for stimulant abuse and addiction. Children never become addicted.

What about this civil class-action suit? The attorneys are modeling their charges on the recent successful litigation against tobacco companies. But there is a major difference between Ritalin and tobacco. Unlike tobacco, the medical establishment—most notably the American Psychiatric Association along with the main professional child psychiatry association—solidly backs if not promotes the use of Ritalin for ADHD. The vast bulk of scientific literature supports the short-term effectiveness and safety of the drug. Is the pharmaceutical industry suppressing information to the contrary? Rumors abound, including a counterrumor that this action is terribly reminiscent of Scientology-inspired suits in the late 1980s that temporarily led to decreases in Ritalin use in certain parts of the country.

Only the disclosure that comes with discovery will determine whether a Ritalin conspiracy exists. But even without a conscious plan, the influence of pharmaceutical



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industry dollars for research support and advertising—first to physicians and now directly to families—has been profound. The market forces of Adam Smith's "invisible hand" operate within the world of childhood mental health and illness. American psychiatry's infatuation with the brain coincides with a drug industry more than happy to contribute funds for research that only counts symptoms and pills. If only family counseling or special education rewarded stockholders the same way Ritalin or Prozac [fluoxetine hydrochloride] does.

Practically every researcher in ADHD now accepts drug company money, as do the self-help groups for at least a part of their work and projects. They would say that they are not influenced by the source of their funding. However, many worry otherwise, from the physicians at local hospital grand rounds listening to a lecture "supported in part by drug company X" to the editors of the *New England Journal of Medicine* reviewing the latest research findings.⁴ And the economics of managed care drives physicians toward prescribing Ritalin as a "quick fix" because talking to parents and working with schools simply take too much time.

The "success" of Adderall, which was vigorously marketed to physicians, is more a sign of "hype" activity than any real medical breakthrough. The advertising for the new stimulant product for ADHD, Concerta, crosses new marketing boundaries because it is the first prescription drug for a childhood psychiatric condition marketed directly to parents. The picture of a smiling boy holding a pencil surrounded by his happy parents and sister tells you that they're pleased because the boy is now being treated for ADHD, a biologic disorder best treated with a pill. Such presentations can only further promote a brain-based view of behavior. They ignore and deny the importance of the environment—family, school, neighborhood, and culture—in a child's healthy emotional development.

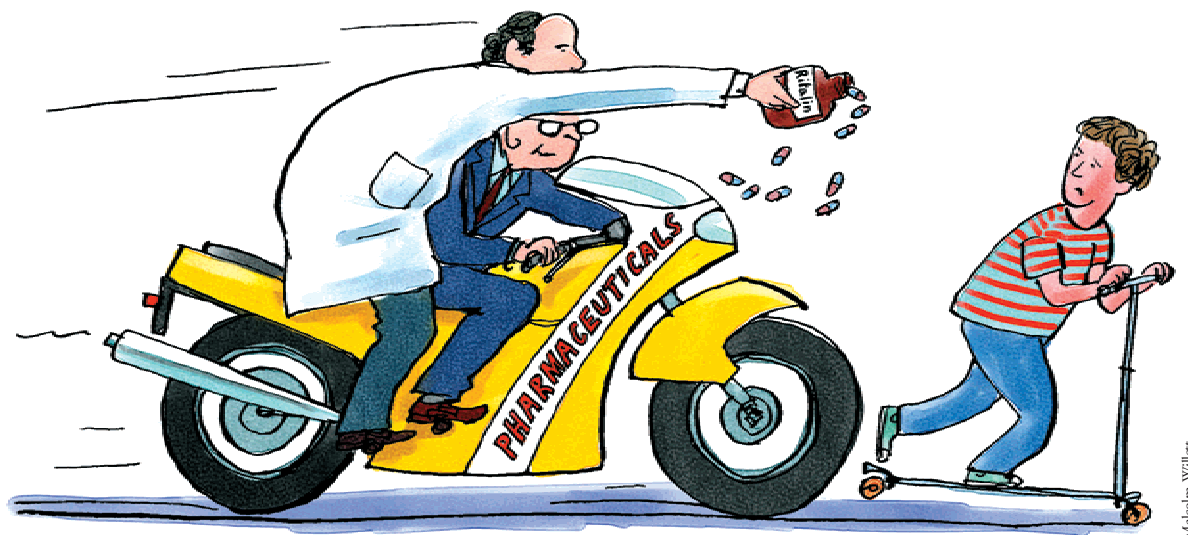
The NIMH conference set out a course to specifically study ADHD and Ritalin use in toddlers. But virtually every researcher at that conference receives funds from the pharmaceutical industry. At the Surgeon General's conference, it was clear that nondrug approaches to children are egregiously underfunded. What about taking yet another cue from the tobacco wars and developing a tax on either pharmaceutical profits or the drugs themselves that would be directed to other effective interventions for ADHD, like parent and teacher behavioral management training? Specific tax incentives and disincentives are the most likely way that the public, through government action, will be able to influence otherwise powerful economic forces that push toward only medicating for children's problems.

Parents should feel that they can still choose Ritalin safely for their child after they have fully explored issues of family, learning, and school. These new civil suits will only confuse and frighten undecided parents. Unfortunately, given the massive effort to convince America that their children's brains are bad, only such extreme countermeasures like the Ritalin suit may get the public's attention.

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